

HARRIS COUNTY PUBLIC HEALTH (HCPH)

Epidemiology Data Request Instructions

Please read this form and the accompanying 'Epidemiology Data Request Form' thoroughly prior to submission. Think through your request and fill in all fields as completely and accurately as possible, as this will allow us to fulfill your request more efficiently. If you have questions after reading these documents, need help completing the data request form, or would like to arrange a phone consultation prior to submitting your request, please contact the appropriate HCPH representative (listed below).

Chronic Disease Epidemiology: Dr. Deborah Bujnowski (dbujnowski@hcphe.org)

Environmental Epidemiology: Dr. Yeh-Hsin Chen (ychen1@hcphe.org)

Emerging/Infectious Disease Epidemiology: Dr. Diana Martinez (dmartinez@hcphe.org),
Program Manager

1. OTHER DATA SOURCES

We are happy to help you with your request, but some public health and population data are available online, and you may be able to find what you need quickly and easily. The following websites may be useful:

- *<https://sph.uth.edu/research/centers/ihp/health-of-houston-survey-2010>
(Health of Houston Survey)
- *<http://healthdata.dshs.texas.gov/Home>
(Texas statistics, including demographics, causes of death, Texas Behavioral Risk Factor Surveillance Survey, and Texas Youth Risk Behavior Survey)
- *<http://houstonstateofhealth.org/>
(Houston State of Health, which focuses on local public health trends, data, and statistics)
- *www.cdc.gov/nchs
(National health statistics)
- *www.factfinder.census.gov
(general population statistics)
- *<http://soupfin.tdh.state.tx.us/>
(Texas health data)

2. TIME FRAME

- a. Fill in the date you are submitting your request
- b. Fill in the date by which you would like your request completed. We often receive urgent requests, so this will assist us in prioritizing and planning.

3. TYPE OF REQUEST

Indicate if your request pertains to chronic disease, environmental, or emerging/infectious disease epidemiology. This will help us to route your request appropriately.

4. CONTACT INFORMATION

Include your name, title, organization, email, phone number, and address.

5. ORGANIZATION TYPE/AFFILIATION

- a. If you are a Harris County employee, specify your division or agency within HCPH, or your other Harris County affiliation.
- b. If you are not a Harris County employee, please specify your affiliation.

6. DATA PUBLISHING OR REPRODUCTION

- a. Indicate if you intend to publish or reproduce the data
- b. Note that your data source must be acknowledged
- c. Indicate in what format you intend to publish or reproduce the data

7. PROPOSED USE OF DATA

- a. Check the appropriate box indicating how you plan to use the data
- b. Explain in further detail how you intend to use the data and what you are trying to communicate; briefly describe your program or project. This additional information will help us understand your request, and may provide ideas for additional data sources.
- c. Explain the specific data you need, for example causes of chronic disease related death, percent of people who have been told they have asthma, etc.
- d. Specific data source, if known
 - i. Texas BRFSS (Behavioral Risk Factor Surveillance System)
 - ii. Texas YRBS (Youth Risk Behavior Survey)
 - iii. Mortality data
 - iv. Hospital discharge data
 - v. Health of Houston survey
 - vi. Census
 - vii. Child lead testing
 - viii. Texas cancer registry
 - ix. Syndromic surveillance
- e. If your request is related to a past request or you have a specific chart or table you would like us to replicate, indicate so here

8. RESEARCH QUESTION

Provide specific details regarding the question you are trying to answer, and explain what you want to communicate with the data you're requesting. If you are looking for data from a specific source, include that information in this section.

9. DATA DESCRIPTION*

****This section is optional.*** *If, after reading this section of the data request form and corresponding instructions below, you are not sure how to describe your data or what analyses you'd like performed, we are happy to speak with you about these details. Instead of completing this section, please state 'phone consultation requested' in this section and we will contact you to make arrangements.*

Describe how you want your data analyzed. As you become more specific, the number of cases for each group will decrease. In some circumstances, this could result in confidentiality concerns and numbers too low to be reported (the minimum number of cases required for reporting will vary based on factors such as data source and condition/illness of interest); if this occurs, we can assist you in figuring out how to aggregate your data.

a. Time frame (the year(s) you are requesting)

The most recent year of data available will vary depending on the data source. Not all data sources are available for all years, and generally, data are not available for the current calendar year. Indicate the year(s) for which you want data. You may request individual years (e.g., 2010) or aggregate years (e.g., 2006-2010). Consider how old is too old (e.g., if you are writing a grant, will you need data from within the last five years?).

b. Population age

Are you interested in specific age groupings (e.g., 21-29 years, 30-39 years)? Or do you want to find out about a group as a whole, such as all adults?

c. Race, ethnicity, and sex subgroups

Are you looking for information on specific race or ethnic groups, or do you want to find out about the overall population? Do you want comparisons by sex (males vs. females)?

d. Geographic area

What is your geographic area of interest? Examples include Harris County, Houston, zip code, census tract, census block group. You may also specify other units or areas of interest, such as a list of zip codes. Note: not all data are available for all geographic areas.

e. Utilize the additional space provided to provide any additional details about how you want your data analyzed, or other specifics regarding your request, that may not have been covered previously.